

# CLAIMS ONLY

Application Number

10/530148

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend		Indep		Depend	
1							61							
2							62							
3							63							
4							64							
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48														
49														
50														
Total Indep			2				Total Indep							
Total Depend			30				Total Depend							
Total Claims			32				Total Claims							